

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

## To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>FEMINIST MAJORITY</b>		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1600 WILSON BLVE SUITE 801		
(c) City, State and ZIP Code ARLINGTON VA 22209		3. FEC Identification Number <div> <div>C</div> <div>C90010646</div> </div>
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report ☒ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on  /  /

5. COVERING PERIOD:

FROM  /  /

THROUGH  /  /

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6. TOTAL CONTRIBUTIONS.....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  912.50

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

DATE \_\_\_\_\_

*[Electronically Filed]*

Gaylynn Burroughs

*Gaylynn Burroughs*

04/02/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 2 OF 3  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

FEMINIST MAJORITY

Full Name (Last, First, Middle Initial) of Payee

Gaylynn Burroughs

Date of Public Distribution/Dissemination

MM / DD / YYYY  
04 / 01 / 2016

Mailing Address 1600 WILSON BLVE SUITE 801

Amount

140.00

Transaction ID : F57.4458

Purpose of Expenditure  
Payroll & Benefits - Vote for Hillary (estimated)Category/  
TypeOffice Sought: ☐ House State: WI  
☐ Senate District: \_\_\_\_\_  
☒ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
HILLARY RODHAM CLINTONCalendar Year-To-Date Per Election  
for Office Sought

185.00

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Beth Rader

Date of Public Distribution/Dissemination

MM / DD / YYYY  
04 / 01 / 2016

Mailing Address 1600 WILSON BLVE SUITE 801

Amount

45.00

Transaction ID : F57.4457

Purpose of Expenditure  
Payroll & Benefits - Vote for Hillary (estimated)Category/  
TypeOffice Sought: ☐ House State: WI  
☐ Senate District: \_\_\_\_\_  
☒ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
HILLARY RODHAM CLINTONCalendar Year-To-Date Per Election  
for Office Sought

45.00

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Camen Rios

Date of Public Distribution/Dissemination

MM / DD / YYYY  
04 / 01 / 2016

Mailing Address 5056 Shipley Glen Drive

Amount

160.00

Transaction ID : F57.4460

Purpose of Expenditure  
Ad Design - Vote for Hillary (Estimated)Category/  
TypeOffice Sought: ☐ House State: WI  
☐ Senate District: \_\_\_\_\_  
☒ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
HILLARY RODHAM CLINTONCalendar Year-To-Date Per Election  
for Office Sought

412.50

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 345.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures.....▶  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 3 OF 3  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

FEMINIST MAJORITY

Full Name (Last, First, Middle Initial) of Payee

Eleanor Smeal

Date of Public Distribution/Dissemination

MM / DD / YYYY  
04 / 01 / 2016

Mailing Address 1600 WILSON BLVE SUITE 801

Amount

67.50

Transaction ID : F57.4459

Purpose of Expenditure  
Payroll & Benefits - Vote for Hillary (estimated)Category/  
TypeOffice Sought: ☐ House State: WI  
☐ Senate District: \_\_\_\_\_  
☒ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
HILLARY RODHAM CLINTONCalendar Year-To-Date Per Election  
for Office Sought

252.50

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Twitter

Date of Public Distribution/Dissemination

MM / DD / YYYY  
04 / 01 / 2016Mailing Address 1355 Market Street  
Suite 900

Amount

500.00

Transaction ID : F57.4461

Purpose of Expenditure  
Online Advertising -Vote for Hillary (Estimated)Category/  
TypeOffice Sought: ☐ House State: WI  
☐ Senate District: \_\_\_\_\_  
☒ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
HILLARY RODHAM CLINTONCalendar Year-To-Date Per Election  
for Office Sought

912.50

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ PresidentCheck One: ☐ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 567.50

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶ 912.50  
(carry total from last page forward to Line 7)